# Flexible Working Application Form

This form is to be completed by any employee wishing to request a change to their working pattern under the right to request flexible working, as per UK legislation (April 2024 update). Please complete all sections clearly.

## Employee Details

Name:
Job Title:
Department:
Manager:
Date of Request:

## Current Working Pattern

Please describe your current working pattern (days/hours/location):

## Requested Working Pattern

Please describe the change you are seeking (e.g. different start/finish times, compressed hours, homeworking days):

Requested start date of new working pattern:

## Reason for Request (Optional)

Although not mandatory, you may choose to state your reason (e.g. childcare, health, wellbeing, study):

I confirm I am making this request under my statutory right to request flexible working (up to two requests per 12 months). Please confirm receipt of my request via email held on file.

**Employee Signature:**

**Date:**